POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	CXS		9/1/99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		7619	9/8/99

INDEX OF CLAIMS

✔	.... Rejected		N	....	Non-elected
=	.... Allowed		I	....	Interference
−	(Through numeral)... Canceled		A	....	Appeal
÷	.... Restricted		O	....	Objected

Claim		Date											
Final	Original	6/6/00	3/25/00	3/13/01	3/8/01	3/13/02	5/21/02						
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If more than 150 claims or 10 actions
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